



DOCKET NO. GYN-5009
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Thomas Ryan et al.

Serial No.: 10/674,453

Art Unit: 3731

Filed : September 30, 2003

Examiner: N/A

For : ELECTROSURGICAL INSTRUMENT AND METHOD FOR TRANSECTING AN ORGAN

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

Jan 7, 2004
(Date of Deposit)

Melissa J. Szanto

(Name of applicant, assignee, or Registered Representative)

Melissa J. Szanto
(Signature)

Jan 7, 2004
(Date of Signature)

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Thomas Ryan et al. entitled Electrosurgical Instrument And Method For Transecting An Organ attorney Docket No.GYN-5009, to complete, pursuant to Rule 51, this application filed on September 30, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/GYN-5009/MJS in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/GYN-5009/MJS. This sheet is submitted in triplicate.

Respectfully submitted,

Melissa J. Szanto
Melissa J. Szanto
Reg. No. 40,834
Attorney for Applicant(s)

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-1365



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	GYN-5009		
	First Named Inventor	Thomas Ryan		
	COMPLETE IF KNOWN			
	Application Number	10/674453		
	Filing Date	September 30, 2003		
	Group Art Unit	N/A		
	Examiner Name	N/A		
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ELECTROSURGICAL INSTRUMENT AND METHOD FOR TRANSECTING AN ORGAN <i>(Title of the Invention)</i> the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) 09/30/2003 as United States Application Number or PCT International Application Number 10/674453 and was amended on (MM/DD/YYYY) <input type="checkbox"/> I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

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☐ Practitioner(s) named below:
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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City:

State:

ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Thomas

Family Name
or Surname Ryan

Inventor's
Signature

Date

Residence: City Flemington

State N.J.

Country U.S.A.

Citizenship U.S.A.

Mailing Address 16 Fieldstone Place

City Flemington

State N.J.

ZIP 08822

Country U.S.A.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Rebecca

Family Name
or Surname Leibowitz

Inventor's
Signature

Date

Residence: City Scotch Plains

State N.J.

Country U.S.A.

Citizenship U.S.A.

Mailing Address 2094 Princeton Avenue

City Scotch Plains

State N.J.

ZIP 07076

Country U.S.A.

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Roddi J.

Family Name
or Surname Simpson

Inventor's
Signature

Date

Residence: City Watchung

State N.J.

Country U.S.A.

Citizenship U.K.

Mailing Address 679 Mountain Boulevard, #3

City Watchung

State N.J.

ZIP 07069

Country U.S.A.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

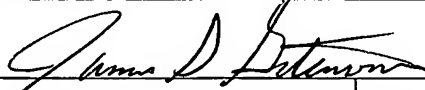
NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James S.

Family Name
or Surname Gatewood

Inventor's
Signature



Date 11-19-2003

Residence City Chesapeake

State VA

Country U.S.A.

Citizenship U.S.A.

Mailing Address 601 San Pedro Drive

City Chesapeake

State VA

ZIP 23322

Country U.S.A.



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	First Named Inventor	Thomas Ryan
	COMPLETE IF KNOWN	
	Application Number	10/674453
	Filing Date	September 30, 2003
	Group Art Unit	N/A
	Examiner Name	N/A

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ELECTROSURGICAL INSTRUMENT AND METHOD FOR TRANSECTING AN ORGAN
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 09/30/2003 as United States Application Number or PCT International Application Number 10/674453 and was amended on (MM/DD/YYYY) ☐

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

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☐ Practitioner(s) named below:
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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor.

Given Name
(first and middle [if any]) Thomas

Family Name
or Surname Ryan

Inventor's
Signature

Thomas

Date

19 NOV 03

Residence: City Flemington

State N.J.

Country U.S.A.

Citizenship U.S.A.

Mailing Address 16 Fieldstone Place

City Flemington

State N.J.

ZIP 08822

Country U.S.A.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor.

Given Name
(first and middle [if any]) Rebecca

Family Name
or Surname Leibowitz

Inventor's
Signature

Rebecca Leibowitz

Date

21 Nov 03

Residence: City Scotch Plains

State N.J.

Country U.S.A.

Citizenship U.S.A.

Mailing Address 2094 Princeton Avenue

City Scotch Plains

State N.J.

ZIP 07076

Country U.S.A.

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor.

Given Name
(first and middle [if any]) Roddi J.

Family Name
or Surname Simpson

Inventor's
Signature

Roddi Simpson

Date

11/19/03

Residence: City Watchung

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Citizenship U.K.

Mailing Address 679 Mountain Boulevard, #3

City Watchung

State N.J.

ZIP 07069

Country U.S.A.

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James S.

**Family Name
or Surname** Gatewood

**Inventor's
Signature**

Date

Residence: City Chesapeake

State VA

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Citizenship U.S.A.

Mailing Address 601 San Pedro Drive

City Chesapeake

State VA

ZIP 23322

Country U.S.A.